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CENTRAL INTELLIGENCE AGENCY
INFORMATION FROM

FOREIGN DOCUMENTS OR RADIO BROADCASTS

REPORT

DATE OF

INFORMATION 1950

DATE DIST. 2 70ct 1950

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USSR

SUBJECT

COUNTRY

Scientific - Medicine, infectious diseases

HOW PUBLISHED

Daily newspaper and book

WHERE

PUBLISHED Tashken

Tashkent; Moscow

DATE

LANGUAGE

PUBLISHED 1945; 1950

Russian

NO. OF PAGES 2

SUPPLEMENT TO REPORT NO.

CONTAINS INFORMATION AFFECTING THE NATIONAL DEFENSE TO STATES WITHIN THE MEANING OF ISPICIMACE ACT SO D 32, AS AMENDED. ITS TRANSMISSION ON THE REVELATION TS IN ANY MANNER TO AN UNAUTHORIZE I LESSON IS PRO-

THIS IS UNEVALUATED INFORMATION

SOURCE

Pravda Vostoka and Uchebnik Parazitologii Cheloveka s Ucheniem o Perenoschikakh Transmissivnykh Bolezney, by Ye. N. Pavlovskiy, 4th Edition, Medgiz, Moscow, 1945, Army Medical Library No QX4.P338u.

THE POSSIBILITY OF TRANSMISSION OF LEISHMANIASIS BY DOGS IN THE USSR

According to <u>Pravda Vostoka</u> of 2 August 1950, the Executive Committee of the Tashkent Order of Labor Red Banner City Soviet of Workers' Deputies passed a regulation, dated 20 July 1950, to the effect that dogs and cats kept in yards which are unsafe from contagious diseases, as well as in threatened zones, are subject to removal. Furthermore, bringing dogs to markets, parks, squares, and other public places is forbidden; such dogs are subject to removal and destruction even when they are led on a leash.

In the light of the unusually severe measures taken against contagion transmitted by dogs in the city of Tashkent, it is of interest to note that according to Ye. N. Pavlovskiy's Textbook of Human Parasitology and the Science of Transmitters of Infectious Diseases, Medgiz, 1945, Moscow, pp 45-54, dogs in Tashkent are considered to be transmitters of both visceral leishmaniasis (kalazara, Leishmania donovani) and a form of dermal leishmaniasis (possibly Leishmania tropica.)

According to Pavlovskiy, it was possible under natural conditions in Tashkent to transmit the infection from a dog suffering from visceral leishmaniasis to a healthy dog, using as transmitters female sandflies of the varieties Phlebotomus papstasii and Phlebotomus sargenti. In this process, states Pavlovskiy, the healthy dog was infected with a dermal rather than intestinal form of the disease, which may mean that the morphologically indistinguishable causative factors of L. donavani and L. tropica are identical. Furthermore, according to Pavlovskiy, human beings can be infected with the dermal form of the disease via a Phlebotomus carrier which had been in contact with a dog suffering from L. donovani. Pavlovskiy goes on to say that N. Khodunkin considers that infected dogs form a reservoir of human kala-azar. He further states that dogs which have the disease often exhibit no symptoms; in Tashkent, 6.6% of apparently healthy dogs are infected with leishmaniasis. According to Pavlovskiy, kala-azar in Central Asia affects mainly children. Prophylactic measures are extermination of diseased dogs and of sandflies.

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Pavlovskiy goes on to say that as far as human L. tropica is concerned, the disease occurs extensively in Transcaucasia and Central Asia, particularly in towns. Morphologically the causative factor of L. tropica cannot be distinguished from the causative factor of L. donovani, he states. Both can be readily cultivated in artificial media. There are two forms of L. tropica (dermal or cutaneous leishmaniasis), which differ as far as the length of the incubation period is concerned (3-6 months up to $1-l\frac{1}{2}$ years and 1-8 weeks respectively) and are sometimes regarded as two distinct diseases (Latyshev, Kozhevnikov, et al.). The second form occasionally spreads to such an extent that the infection assumes the dimensions of an epidemic outbreak.

Pavlovskiy states that the chief natural reservoir of L. tropica is found among various species of wild rodents (Rhombombis opimus, Meriones erythrourus, M. meridianus, Spermophilopsis leptodactylus). Phelebotomus caucasicus transmits the infection from rodent to rodent, while P. papatasii transmits the disease from infected rodents to humans. In the desert, the sandflies in question breed almost exclusively in rodent holes. As prophylactic measures, exterminanation of rodents and sandflies and innoculation of the population (particularly children) with the living causative factor are applied. A new method of treatment proposed by Academician V. P. Filatov consists in the transplantation of skin (patches having the dimensions of 12-15 cubic centimeters) obtained from corpses which have been preserved in the cold for 7 days.

At the time Pavlovskiy was writing his book, conditions in Tashkent were considered to be improving with regard to the incidence of L. tropica.

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